

Framework for Maryland's Interagency Council on Homelessness

VISION: As a result of aligned resources, policy and practice statewide, the homeless and those at risk of becoming homeless in Maryland, will have access to services, emergency shelter and long-term housing options to assist them in attaining self sufficiency and prevent their return to homelessness.

Draft as of February 2016

GOAL 1 -- Increase statewide, the number of permanent supportive housing options available to the homeless (Also a Federal requirement)

The “Housing First” philosophy of Permanent Supportive Housing (PSH) has demonstrated both cost- and outcome-effectiveness, and has become the principal public health paradigm to address homelessness in communities across the country. Maryland’s Interagency Council on Homelessness will facilitate increased and improved intra/interagency partnerships to leverage effectively limited federal, state, and local resources for development of permanent supportive housing.

OBJECTIVE	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
Determine if existing resources to house the homeless are being used most effectively to include PSH.	<ul style="list-style-type: none"> Existing state and federal resources need to be aligned towards a common goal of increasing PSH housing options statewide. Create a summary of existing homeless services resources. 	Housing First work group of the ICH, includes: DHR, DHCD, DHMH, DoD.	<ul style="list-style-type: none"> Ongoing since March 2015, meetings held every 2 months. Will be finalized by end of Oct. 2015.
Develop and adopt a state Housing First definition.	<ul style="list-style-type: none"> A Housing First definition will be adopted by members of the Housing First workgroup and will be presented to the ICH. 	ICH and Housing First Work group.	<ul style="list-style-type: none"> Working group finalized definition on Sept. 24, 2015, will be presented to ICH on Oct. 1 2015.
Assess existing Housing First Programs.	<ul style="list-style-type: none"> Analyze existing or new construction projects that are executing a Housing First model that meets state definition. Analyze intake procedures, programmatic requirements and tenancy practices to understand how the project aligns with the state definition. 	Housing First Work Group.	<ul style="list-style-type: none"> Projects will be identified by December 30th, 2015. Preliminary analysis will be completed by July 1st, 2016.
Establish statewide Housing First Principals, goals and programmatic requirements as well as alignment of funding sources to increase availability statewide.	<ul style="list-style-type: none"> Develop recommendations and specific programmatic guidelines for programs to adopt so they may be in accordance with the state Housing First expectations. Consult with existing PSH Housing First developers to assess and remedy the challenges of the current funding structures. Determine how and if incentives for projects that match state Housing First definition can be worked into existing funding programs. Explore ways that capital financing and service funding can be secured simultaneously to increase the development of more PSH. 	DHCD, DHR, DHMH and PSH Developers.	<ul style="list-style-type: none"> Ongoing through 2016, final recommendations to be made in the 2016 Annual Report on Homelessness.

GOAL 2 -- Improve the availability of emergency housing solutions to the homeless that include eviction prevention, lower barrier emergency sheltering, rapid re-housing and cold weather sheltering statewide.

Emergency shelter is a short-term public health necessity while we continue to strive for long-term sustainable solutions for homelessness. Maryland's Interagency Council on Homelessness will determine and promote best practices and models for providing emergency shelter, shelter diversion and rapid re-housing, in order to provide client-centered and trauma-informed support services using a harm reduction model, and to ensure equal access to protected classes, and vulnerable individuals and families. The Council will identify and address service gaps that prevent providers from serving the full needs of people who are homeless.

OBJECTIVES	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
ICH will assess, evaluate and make recommendations to improve the current practice and use of rapid re-housing funding (RRH).	<ul style="list-style-type: none"> Collect a summary of all current RRH programs across the state and will provide the ICH with the summary information. Determine if RRH can be increased across the state and determine how that will happen. 	The Housing First agency group of DHCD, DHR, DHMH and DoD and a sub-group of CoC's that currently receive Rapid Re-housing funding.	<ul style="list-style-type: none"> Ongoing through the end of 2015. Recommendations will be made to the ICH during the first quarter of 2016.
The ICH will determine what gaps currently exist in how jurisdictions provide low-barrier shelter.	<ul style="list-style-type: none"> Assess which CoC's are successfully offering lower barrier shelter options. Adopt a definition of "low barrier sheltering" based on available federal guidance. Determine which CoC's that are not offering low barrier sheltering and assess what the obstacles are to do so. Determine what types of resources need to be made available to CoC's to offer such emergency relief options. 	A work group comprised of ICH members who are also CoC leads, along with other CoC leads and shelter providers.	<ul style="list-style-type: none"> Ongoing through the end of 2015 and into 2016. Definition by end of Dec. 2015. First quarter (Q1) of 2016. Ongoing through the end of Q1, 2015
The ICH will provide leadership direction and guidance to CoC's for improved cold weather sheltering (CWS) statewide.	<ul style="list-style-type: none"> Hold a series of meetings with regional jurisdictions throughout the state to assess the practices of stakeholder coordination necessary for cold weather sheltering. The ICH will create general guidelines and expectations for CWS to all jurisdictions to ensure each area is best utilizing available resources to provide CWS to as many as possible. Work with jurisdictional leads to create a more proactive approach to CWS that will allow clients being served in CWS year after year, to access services that will prevent their cycle. 	Jurisdictional leaders (CoC leads, DSS and health department contacts) responsible for CWS.	<ul style="list-style-type: none"> Kick-off meeting held on 9/25/15, next one to be held in October 2015. By December 1st, 2015. Ongoing throughout the cold weather seasons of 2015 and 2016.

GOAL 3 -- Improve the emergency services network for the homeless, by creating partnerships with local stakeholders to create a comprehensive assessment and discharge planning process used at intake and discharge from medical facilities or jails (Also a Federal Requirement).

Maryland's Interagency Council on Homelessness will work to ensure that no one is discharged into homelessness from hospital care, emergency rooms, nursing homes, mental health clinics, state hospital facilities, or carceral institutions. The Council will promote the training and relationships necessary to assure consistent and effective discharge planning for health and housing needs. This includes including memoranda of understanding among the medical and state facilities releasing clients and the emergency, cold weather, transitional, and permanent housing facilities accepting them. The Council will work with health and service providers to increase respite/convalescent care throughout the state for people experiencing homelessness.

OBJECTIVES	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
Assess how the homeless are accessing emergency care and identify where improvements are needed.	<ul style="list-style-type: none"> ▪ Improve the intake assessment completed with homeless patients when they enter a hospital to ask questions about a person's homelessness status. ▪ Propose questions that will be asked upon intake to the hospital to better assess a patient's risk of homelessness upon discharge. 	ICH, Health and Homelessness work group, health care providers and community service providers.	
Improve the manner in which homeless patients are being released from hospitals back into the community.	<ul style="list-style-type: none"> ▪ Consider and approve specific discharge goals and/or adopt a mandate that health care providers will follow to discharge people safely back to their communities and not back to the street. 	ICH, Health and Homelessness work group, health care providers and community service providers.	
Increase access to proper respite/convalescent care for the homeless.	<ul style="list-style-type: none"> ▪ Determine where current respite/convalescent options are offered statewide. ▪ Determine where more are needed, project a number and funding plan to increase them statewide and a timeframe to do so. 	Health and homelessness work group, DHMH and local Departments of Health.	

GOAL 4 -- Improve the support system that exists for homeless veterans, so that we may end Veteran Homelessness as soon as possible. (Also a federal requirement).

The federal Opening Doors plan aims to end homelessness among veterans by the end of 2015. Maryland's Interagency Council on Homelessness will work with local, state, federal, and non-governmental partners to identify the specialized needs of and available services for homeless veterans in our state, and to improve the range, availability, and coordination of housing and services necessary to end veteran's homelessness.

OBJECTIVES	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
Identify recommendations to improve access to housing for Homeless veterans.	<ul style="list-style-type: none"> Recommend the continuation and expansion of existing housing options, i.e. Grant Per Diem, HUD VASH, and SSVF. Explore methods to increase information sharing between Homeless Service Providers and the VA to better identify veteran-specific housing and support services. Ex: Data sharing agreements. 	Veterans Work Group, DHR, USVA (VISN 5 Homeless Services ¹), COC member organizations.	<ul style="list-style-type: none"> Ongoing. Recommended solution by June 30, 2016.
Identify recommendations to improve access to Employment for homeless veterans.	<ul style="list-style-type: none"> Continue and enhance services provided by the Career One-Stop Center Disabled Veterans Employment Specialist (DVOP) working with emergency and transitional housing locations statewide. Increased DVOP outreach efforts to other housing and homeless service provider organizations statewide. Designation of a specific DVOP that is closest to the Department of Public Safety and Correctional Services (DPSCS) correctional institutions/local correctional facilities to assist incarcerated veterans prior to release with job placement assistance. 	Veterans Work Group, DLLR, veteran centric transitional housing program providers (Grant Per Diem), USVA (VISN 5 Homeless Services).	<ul style="list-style-type: none"> Ongoing throughout 1st and 2nd Quarters of 2016. Ongoing throughout 2nd and 3rd Quarters of 2016. Throughout 3rd and 4th Quarters of 2016.
Improve and make more consistent, the resources available to homeless Vets.	<ul style="list-style-type: none"> Create a shared messaging campaign for all service providers working with Homeless veterans to ensure a consistent message regarding resources is provided to homeless veterans. Work with MD 211 and the Maryland Community Services Locator (MCSL) to enhance the online directory of housing resources for homeless veterans. 	Veterans Work Group, USVA (Maryland, Martinsburg, DC), MDVA, relevant MD State Agencies, community based housing providers, and online resource directories.	

¹ VISN 5 Represents the Healthcare Systems that service Veterans in Maryland, which include Martinsburg, WV, Washington DC VA and MD VA Healthcare system (Baltimore, Perry Point and Lockraven)

<p>Work more collaboratively with existing stakeholders to respond to the needs of homeless veterans.</p>	<ul style="list-style-type: none"> ▪ Complete a statewide survey to assess how the CoC's respond to the needs of homeless veterans and recommend improvements to service delivery. ▪ Create a centralized contact list for all organizations that encompass the continuum of care for homeless veterans. ▪ Establish a network of providers that support homeless veterans and create a formalized method for them to share information, such as in-person regional meetings. 	<p>Veterans Work Group.</p>	<ul style="list-style-type: none"> ▪ Survey done by Nov. 15, 2015, results compiled by Dec. 15, 2015. ▪ January 30, 2016. ▪ June 30, 2016².
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² One representative each from the three VA healthcare systems serving Maryland, one representative from each of the COC networks in Maryland, and one representative from each of the relevant State agencies who serve veterans in Maryland

GOAL 5 – Ensure access to housing, education, employment, and supportive services for youth and young adults experiencing homelessness or transitioning out of state systems. (Also a Federal Requirement)

Housing instability and homelessness are on the rise among youth and young adults between the ages of 16-24. Youth with histories of foster care and juvenile services involvement are disproportionately represented, as are youth identifying as LGBT (lesbian, gay, bisexual, and transgender) and youth of color. Specialized strategies and interventions are necessary to prevent and end homelessness for this high risk group. To aid State and local efforts to address youth homelessness, Maryland's Interagency Council on Homelessness will support the Youth REACH demonstration project, facilitate interagency collaboration, develop sound and effective policy recommendations, and provide technical assistance to ensure that existing and new programs and initiatives adequately address the unique needs of this diverse population.

OBJECTIVE	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
Address service needs of youth and young adults experiencing or at risk of homelessness	<ul style="list-style-type: none"> ▪ Catalog public and private programs, initiatives and resources that address youth and young adult homelessness in the State ▪ Evaluate progress on implementation of 2013 recommendations of the Maryland Task Force on Housing and Supportive Services for Unaccompanied Homeless Youth and recommend next steps and new priorities ▪ Work with state agency representatives and community stakeholders to explore ways in which a robust and coordinated network of programs and initiatives can be built to address youth homelessness in effective and efficient ways ▪ Assist state agencies and community stakeholders in developing funding ideas and proposals to enhance existing strategies and/or develop new programs 	ICH, State agencies, local stakeholders, community service providers.	<ul style="list-style-type: none"> ▪ By end of 1st quarter, 2016. ▪ Ongoing ▪ Ongoing
Address housing needs of youth and young adults experiencing or at risk of homelessness	<ul style="list-style-type: none"> ▪ Assess current availability of safe, decent, affordable housing for unstably housed and homeless youth and young adults ▪ Evaluate progress on implementation of 2013 recommendations of the Maryland Task Force on Housing and Supportive Services for Unaccompanied Homeless Youth and recommend next steps and new priorities Work with ICH member agencies and the ICH Housing First Work Group to determine how existing funding can be targeted to create housing for young adults experiencing homelessness or young people transitioning from state systems 	ICH, State agencies, Housing First Workgroup, local stakeholders, community service providers	<ul style="list-style-type: none"> ▪ By end of 2015 ▪ By end of 1st quarter, 2016. ▪ Ongoing
Support the continuation and expansion of Youth REACH	<ul style="list-style-type: none"> ▪ Recommend continued State funding of Youth REACH for the remainder of the demonstration project at a level sufficient to support statewide participation ▪ Participate in Youth REACH Steering Committee to ensure that data collection and analysis 	ICH, DHCD, local stakeholders	<ul style="list-style-type: none"> ▪ By end of 1st quarter, 2016

	<p>informs ICH budget and policy recommendations</p> <ul style="list-style-type: none"> Encourage and support participation of Local Management Boards and other stakeholders in local Youth REACH planning and implementation 		<ul style="list-style-type: none"> Throughout duration of Youth REACH Throughout duration of Youth REACH
<p>Provide technical assistance regarding youth and young adult homelessness to State and local agencies and organizations</p>	<ul style="list-style-type: none"> Recruit persons with personal experience of homelessness and/or other specific knowledge and experience related to youth and young adult homelessness to serve on ICH Youth & Young Adult Homelessness Work Group Survey local and state stakeholders about efforts to address housing instability and homelessness among youth and young adults Assist State agencies and community organizations with grant/proposal development, as appropriate; and otherwise lend expertise and knowledge of the ICH Youth & Young Adult Homelessness Work Group in support of development of effective strategies to prevent and end youth and young adult homelessness Work with established groups to explore and educate the ICH about specific issues related to youth homelessness or subpopulations of homeless youth with significant vulnerability and/or unique needs, such as human trafficking, pregnant and parenting youth, LGBT youth, youth of color, youth with disabilities, etc. 	<p>ICH, local stakeholders, community service providers</p>	<ul style="list-style-type: none"> Ongoing Ongoing

GOAL 6 – Achieve coordinated intake and assessment for all jurisdictions in Maryland by the end of 2016. (Also a Federal Requirement)

Maryland’s Interagency Council on Homelessness will work with local continua of care to coordinate the support safety net for those who are homeless to ensure that access to services is fair, equitable, clear, and provided with a “no wrong door” approach. The Council will support local continua in meeting federal requirements for “coordinated intake and assessment” (CA), which seek to connect people experiencing homeless with housing, income, and supportive services in the most efficient and effective manner possible.

OBJECTIVES	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
Assess current progress of and local jurisdictional work to achieve Coordinated Intake and Assessment.	<ul style="list-style-type: none"> ▪ Create an assessment tool to gather information from CoC leads about the status of their Coordinated Intake and Assessment efforts. ▪ Regional CoC’s will be convened to discuss their work, share best practices and learning’s with other CoC’s. 	CoC leads and ICH.	<ul style="list-style-type: none"> ▪ Assessment tool to be created by January 1st, 2015. ▪ Convening to be held within the first two quarters of 2016.
The ICH will create a tool for CoC’s that provides guidance, expectations and best practices useful to state CoC’s.	<ul style="list-style-type: none"> ▪ The ICH will ask for guidance and support from the USICH to learn how other states have achieved this federal goal. ▪ 	CoC leads and ICH, HUD can provide some technical assistance.	